

A Registry
File *Medical*

2 September 1977

MEMORANDUM FOR: Acting Deputy Director for
Administration

FROM: John F. Blake
Acting Deputy Director of
Central Intelligence

SUBJECT: Alcohol Abuse Program (AAP)

STATINTL

1. There is attached communication to the DCI from [REDACTED] on the matter of the Agency's Alcohol Abuse Program.

2. Unless there are strong reasons to the contrary, I should like to implement the two preferences expressed by the Director at the bottom of [REDACTED] letter.

STATINTL

3. I would appreciate your reaction on this matter. If the responsibilities are to be transferred, please undertake the necessary regulatory changes, etc., to bring about the implementation.

STATINTL

[REDACTED]
John F. Blake

Att

Distribution:
Orig - Acting DDA
1 - DCI
1 - [REDACTED]
1 - ADDCI
1 - ER

STATINTL

24 August 1977

MEMORANDUM FOR: Admiral Turner

FROM: [REDACTED]

SUBJECT : Alcohol Abuse Program (AAP)

1. You received a confidential letter on 20 June 1977 from [REDACTED] agency employee, which asked that you endorse a better AAP at the Agency. You passed the letter on to me and I have been working on it ever since.

2. I've met with [REDACTED] several times, Mr. Hal Morley, who runs the State Department's AAP, [REDACTED] of the Agency's Psychiatric Division, Fred Janney (Director of Personnel), [REDACTED] (present Agency AAP coordinator), and Dr. Charles Bohrer (Agency Director of Medical Services).

3. My conclusions as a result of these meetings:

- ° Although everyone recognizes alcoholism as a disease, and most agencies run their AAP through their Medical Department, we assign responsibility for our program to the Office of Personnel (OP).
- ° Despite what seems to have been a sincere effort by OP to run a good program (regulations, procedures, etc., required by Federal law; an Alcohol Abuse Coordinator assigned - a collateral duty of [REDACTED] in Personnel; training films shown from time to time; etc.), because OP also is responsible for hiring, firing, promotions, etc., individuals are fearful of revealing their problem for the effect it may have on their job. Consequently, it is generally perceived that there is no where officially where an individual with an alcohol problem can go for help.

STATINTL

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-3-

4. I believe Bohrer's proposal is a big step forward. Although it was suggested by [redacted] and other AA'ers that a full-time alcohol abuse counsellor (who could be available for confidential counselling, run an aggressive training program, and channel individuals to the most appropriate treatment) is necessary, both Bohrer and Janney felt that in light of the RIF requirements at the Agency we should not contemplate creating a new slot and hiring someone. I frankly don't know how key this kind of an individual would be to an effective program, so reserve judgment until I see how Bohrer's other proposed actions pan out. I do think the program remains misplaced in the Office of Personnel, but again, maybe the closer liaison between Personnel and Medical Offices on this problem will make the program work.

5. I recommend:

OK ° You sign and issue the DCI policy statement affirming your support

OK ° You endorse Dr. Bohrer's other two proposals in a Director's Note

Both of the above are in preparation by the Office of Personnel and will be provided shortly.

° You sign attached note to [redacted] apprising him of the action you intend to take.

Very Respectfully,

[redacted]

STATINTL

1 SEP 1977

Offhand I'd prefer 1) To have a full time counsellor - we're adding 150 + new jobs in DDI & DDA while dismissing 800 DDO - 1 more? I'd also prefer shifting AT&T & Plans. Don't clear all of this with Jack Blake. STATINTL

~~Administrative - Internal Use Only~~

Approved For Release 2002/02/13 : CIA-RDP80-00473A000800120001-4

15 August 1977

MEMORANDUM FOR: Director of Personnel

FROM: Charles A. Bohrer, M. D.
Director of Medical Services

SUBJECT: Recommendations Concerning Agency Program
for the Prevention and Treatment of
Alcoholism

STATINTL

1. Following the meeting in your office with [REDACTED] and myself, further review of the Agency program and OMS' role in it has been completed.

2. At this time it is our view that the addition of personnel, such as a counselor, should be deferred for at least a year at which time this topic and the accomplishments during that time should again be reviewed. There are positive steps that should be taken now however to strengthen the program.

These suggested steps are as follows:

a. A brief policy statement by the DCI affirming his interest in this topic and reaffirming the Agency efforts, as outlined in [REDACTED]. Emphasis should be placed on the goal of rehabilitation.

b. An announcement which would publicize the availability of the in-house volunteer Alcoholics Anonymous group for individual participation in addition to other ongoing approaches aimed at rehabilitation. (The principal individuals involved in this group have, at my request, been

STATINTL

SUBJECT Approved For Release 2002/02/13 : CIA-RDP80-00473A000800120001-4
 Prevention and Treatment of Alcoholism

STATINTL
 STATINTL

queried by [REDACTED] about such public announcement. They are in agreement with such announcement but would like [REDACTED] to be the referral point with their identity remaining anonymous to the general Agency populace. I have no problem with that arrangement and neither does [REDACTED]. Other agencies (see attachment) apparently have publicized the existence of in-house Alcoholics Anonymous groups and meetings.

STATINTL

c. An expanded educational effort particularly directed at supervisors under the auspices of the Office of Personnel but supported by OMS using available film, guest lectures, etc.

3. It would seem to me that with the program outlined above and the experience gained from it over a period of at least six and perhaps as long as twelve months, we would be in a much better position to judge the need for additional personnel such as a counselor. I believe the willingness of the in-house Alcoholics Anonymous group to permit public announcement of their availability and the willingness of the Agency to acknowledge their existence and role is a significant positive step to strengthen the program. It may be that at a later date some Alcoholics Anonymous members would be willing to participate in the educational program under certain circumstances.

STATINTL

[REDACTED]
 Charles A. Bohrer, M. D.

Att

STATINTL

31 AUG 1977

F. W. M. Janney
Director of Personnel
5E 58, Headquarters

STATINTL

Acting Deputy Director
for Administration
7D 18, Headquarters

The attached is forwarded
per your request to the
Acting Director of Personnel
on 23 August 1977.

Acting Deputy Director
of Central Intelligence
7E 12, Headquarters

(Signed) F. W. M. Janney

F. W. M. Janney

STATINTL

[REDACTED] USN
Special Assistant to
the Director
7E 12, Headquarters

Distribution:

- 0 & 1 - Addressee
- 1 - A/DDCI
- 1 - ER
- ✓ 1 - A/DDA
- 1 - D/Pers
- 2 - C/SAS (1 w/held)
- 1 - D/OMS

OP/SAS [REDACTED] jfp (30 Aug 77)

STATINTL

Policy Statement Concerning the
Agency's Alcohol Program

Since alcoholism affects one in fifteen people who drink, the chances are that someone with a drinking problem works near you.

STATINTL

The Agency's Program for the Prevention and Treatment of Alcoholism is set forth in Headquarters Regulation [REDACTED]. I urge all employees to reread that Regulation.

I fully endorse a program which provides that an employee with an alcohol problem will receive the same consideration and assistance that is extended within the Agency's official capabilities for any other illness or health problem as long as that employee is willing to recognize that he or she has such a problem and wishes to engage in rehabilitation.

An employee's decision to drink or not to drink is a personal one. However, at such time as the use of alcohol interferes, directly or indirectly, with job performance, your Agency will take action aimed at rehabilitation.

Employees who feel they are having a problem with alcohol are encouraged to contact the Office of Medical Services for assistance and I assure you that those contacts will be preserved in a most confidential manner.

Director's Note Concerning the
Agency's Alcohol Program

STATINTL The Agency's program for the prevention and treatment of alcohol abuse and alcoholism has recently been under review by a member of my Staff. I was pleased to find that the program is based on the general policy of attempting to rehabilitate any employee recognizing a problem and willing to accept help. The complete alcohol program policy statement may be found in [REDACTED] and I fully endorse that policy.

There are certain things, however, that employees at all levels can do to make the alcohol program more effective.

1. Employees who feel that they are having problems as the result of their drinking should contact the Office of Medical Services. You can be assured that these visits will be kept in strict confidence.

2. Supervisors must be alert to early signs of alcohol abuse and bring their observations to the attention of OMS. Numerous studies indicate that an employee who is developing alcoholism will show a deterioration in work performance as the alcoholism progresses.

I am pleased to note that this Agency has an A. A. group which meets once a week during lunch time. I understand that this group was organized approximately three years ago and was one of the first A. A. groups organized in any Federal agency. To preserve its anonymity the group prefers that you contact the Office of Medical Services for further information concerning the place and dates of meetings.

This Agency has a number of excellent films concerning the nature and treatment of alcoholism. Training officers within the various components can obtain titles of the films and may make arrangements to see them by contacting the Alcohol Program Coordinator on extension [REDACTED]

STATINTL

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USE ONLY☐ CONFIDENTIAL☐ SECRET

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SUBJECT: (Optional)

FROM:

Director of Personnel
5 E 58 HQ

EXTENSION

NO.

DATE

19 AUG 1977

TO: (Officer designation, room number, and
building)

DATE

RECEIVED

FORWARDED

OFFICER'S
INITIALSCOMMENTS (Number each comment to show from whom
to whom. Draw a line across column after each comment.)1. [REDACTED] USN
Special Assistant to the
Director

2. 7E 12 HQ

3.

4.

5. Director of Personnel
5 E 58 HQ

6.

7.

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13.

14.

15.

Unless you have some
objections, I intend to proceed
with Dr. Bohrer's recommenda-
tions.

(Signed) F. W. M. Janney

F. W. M. Janney

Dist:

0 - Return to D/Pers

1 - ER

1 - D/Pers Chrono (w/held)

OD/Pers/FWMJanney:jmm (19 Aug 77)

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FORM
1-52

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USE PREVIOUS
EDITIONS☐ SECRET☐ CONFIDENTIAL☐ INTERNAL
USE ONLY☐ UNCLASSIFIED

~~UNCLASSIFIED~~



INTERNAL
USE ONLY



CONFIDENTIAL



SECRET

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ROUTING AND RECORD SHEET

SUBJECT: (Optional)

Recommendations Concerning Agency Program for the
Prevention and Treatment of Alcoholism

FROM:

Director of Medical Services
Room 1D4061 Headquarters

EXTENSION

NO.

DATE

15 August 1977

STATINTL

TO: (Officer designation, room number, and building)

DATE

OFFICER'S
INITIALS

COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)

16 AUG 1977
DD Personnel

16 AUG 1977

RECEIVED

FORWARDED

Director of Personnel

Room 5E-58 Headquarters

16 AUG 1977

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INTERNAL
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SECRET

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ROUTING AND RECORD SHEET

SUBJECT: (Optional)

FROM:

F. W. M. Janney
Director of Personnel
5E 58, Headquarters

EXTENSION

NO

DATE 31 AUG 1977

DD/A Registry

77-4896

STATINTL

TO: (Officer designation, room number, and building)

DATE

OFFICER'S
INITIALS

COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)

1. Acting Deputy Director
for Administration
7D 18, Headquarters

31 AUG 1977

by

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per your request to the
Acting Director of Personnel
on 23 August 1977.

STATINTL

3. Acting Deputy Director
of Central Intelligence
7E 12, Headquarters

4.

STATINTL

5. [REDACTED]
Special Assistant to
the Director

USN

6. 7E 12, Headquarters

7.

8.

9.

10.

11.

12.

13.

14.

15.

Maybe a little long.
So I suggest we knock
off the last para. in
the note. Otherwise
a good item.

Mia

31 AUG 1977

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SECRET

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USE ONLY

UNCLASSIFIED

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SUBJECT: Recommendations Concerning Agency Program for the
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STATINTL

[REDACTED]
Charles A. Bohrer, M. D.

Att

OCCUPATIONAL HEALTH REPORTER

THE NEWSLETTER OF FEDERAL
EMPLOYEES OCCUPATIONAL
HEALTH PROGRAM

Volume 8, Number 7

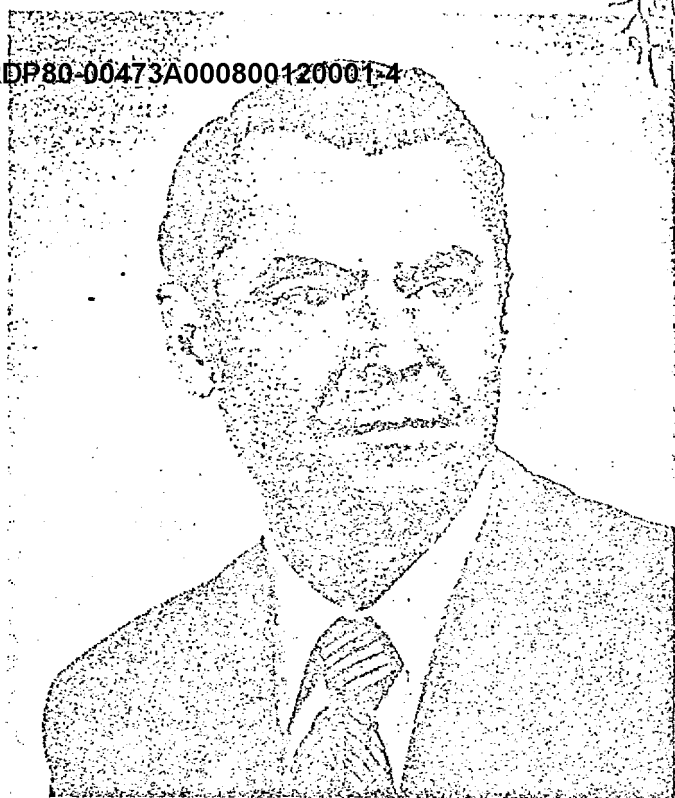
July 1977

CSC Testifies on Alcoholism Program at Senate Hearings

On May 18 and 19, 1977, the Senate Subcommittee on Alcoholism and Drug Abuse conducted hearings on occupational alcoholism programs and proposed legislation S.1107. The proposed legislation would authorize funds for public and private sector employers to encourage the development of occupational alcoholism programs.

Those called to testify included HEW, Postal Service, the CSC, the Alcohol and Drug Problems Association, the National Council on Alcoholism and other representatives from the public and private sectors. Mr. George J. McQuoid, Deputy Executive Director of the U. S. Civil Service Commission reported on the progress of Federal agencies in developing occupational alcoholism programs for their employees. Mr. McQuoid's statement to Senator Hathaway, the Subcommittee Chairman, described the efforts to date as "... a good beginning in dealing with a difficult problem area." He provided the Subcommittee with a review of agency counseling activity during the first four years of program operation (FY 72 through 75). Agency coordinators reported counseling 21,500 employees with alcohol problems. When tabulation of the FY 76 data is completed, the figure is expected to exceed 30,000.

Mr. McQuoid also noted that the actual number of employees impacted may total as much as 60,000 or approximately 3% of the Federal work force. He cited Professor Harrison Rice's research that significant numbers of Federal employees with alcohol problems are being counseled and referred by supervisors to medical



Mr. George J. McQuoid, Deputy Executive Director of the U.S. Civil Service Commission.

personnel or union representatives and hence are not reported to the Commission by agency coordinators. He also noted that an unknown number of employees are seeking help on their own as a result of agency educational efforts. Agencies are also counseling employees with alcoholic family members. In summarizing the forgoing points, Mr. McQuoid stated that the Commission "considers this an indication of increasing agency interest and concern".

The prepared statement noted that much still remains to be done. The FY 75 installation counseling reports showed that about 62% of the locations representing less than 25% of the Federal employees (small installations for the most part) reported no counseling during that one year period. Mr. McQuoid did cite the establishment of two consortia type programs in Boston, MA. and Austin, TX. as an encouraging approach for the development of programs for small installations located in the same geographic area. The Office of Management and Budget has endorsed this effort.

Mr. McQuoid also identified the following areas which require increased CSC and agency efforts:

—receptivity on the part of installation heads and supervisors. The Trice research and GAO testimony at House hearings in June 1976, reported that many installation heads and supervisors remain unconvinced about the need for the programs.

—the importance of union involvement. When union interest and involvement increases there is a corresponding increase in supervisory usage of the program.

—the role of the coordinators. Research indicates that many coordinators are untrained and have insufficient time to accomplish the necessary tasks.

The CSC and all of the other witnesses at the hearings described occupational alcoholism programs as necessary and highly useful in identifying alcoholic people at earlier stages.

A "Double - Martini" Lunch

"For me, that meeting was like a double martini lunch!" The speaker was an exuberant Alcoholics Anonymous member after a recent noontime gathering in a Washington, D.C. Federal building. Neither the comment nor the locale was unusual, as AA groups in increasing numbers take root and flourish in the unfamiliar but friendly soil of government agencies. The remark, of course, was meant to emphasize the psychological support provided to recovering alcoholic workers by work-place A.A. meetings. The simile falls short, however, for the "boost" is provided without the "let down".

Until recently, such meetings were rare and usually unpublicized. The stigma attached to alcoholism, coupled with a fear of damaged careers, discouraged all but the most adamant. It was accepted wisdom that alcoholic workers could not attend A.A. meetings at their place of employment. The "Hughes Act" (PL 91-616) and subsequent Civil Service Commission actions (ac-

agencies develop and maintain "prevention, treatment and rehabilitation programs and services" for their alcoholic employees) have had a perceptible impact in altering these attitudes. One of the results has been a proliferation of visible and highly successful A.A. groups in a wide range of Federal agencies.

According to Don Phillips, Alcoholism/Drug Abuse Program Manager, U.S. Civil Service Commission, A.A. groups, conducting more than 20 meetings a week, are now established in at least 12 departments and agencies in the metropolitan area. Groups are planned in several others. In addition, the Government Printing Office, as a part of its alcoholism program, conducts daily group meetings which, while not technically A.A., are frequently conducted by A.A. members, using an A.A. format. "I've been personally pleased," said Mr. Phillips, "with the way management in the Federal agencies has cooperated with A.A. and endorsed the idea."

While admissions policies differ from agency to agency, almost all meetings are open to anyone holding a Federal identification pass and willing to state his or her destination. Most are open to the public at large (although "Closed" meetings are restricted to persons with an alcohol problem). The Civil Service Commission does not have a complete list of all A.A. meetings in Federal agencies, and would appreciate hearing about those it is unaware of (Call Art Purvis on 632-7672). Those it is aware of are at the following agencies: Agriculture, Army, Commerce, Civil Service Commission, Health, Education and Welfare, Interstate Commerce Commission, Interior, Labor, Library of Congress, Navy, State Department and Treasury. Further information about these meetings and how to start new ones can be obtained from the Civil Service Commission at the above number, or by writing to:

Mr. Donald Phillips
Alcoholism/Drug Abuse Program Manager
USCSC, Room 3468
1900 E. St. NW
Washington, D.C. 20415

Available Films

The use of films on alcoholism and drug abuse can be a useful supplement to supervisory training courses and special educational programs for employees. The CSC central office and regional offices are offering as a service their films to agency health or training personnel. The films are available for that region *only*.

Central Office (Washington Metropolitan area only)
Father Martin's Chalk Talk (General Audience)
The Dryden File (White Collar - Supervisory Training)
Weber's Choice (Blue Collar - Supervisory Training)
Alcoholism: The Bottom Line (Supervisory Training)
Living Sober: The Class of '76 (General Audience)
Walter Fish (General Audience)
America on the Rocks (General Audience)
Alcohol, Drugs, and Alternatives (General Audience)
US (General Audience)
Need for Decision (Supervisory Training)

Boston
Chalk Talk

New York
America on the Rocks
Chalk Talk
Dryden File
Remember My Name (General Audience)

Philadelphia
Alcoholism: The Bottom Line
America on the Rocks
Chalk Talk
Dryden File

Atlanta
None Available

Chicago
Chalk Talk
Dryden File

St. Louis
None Available

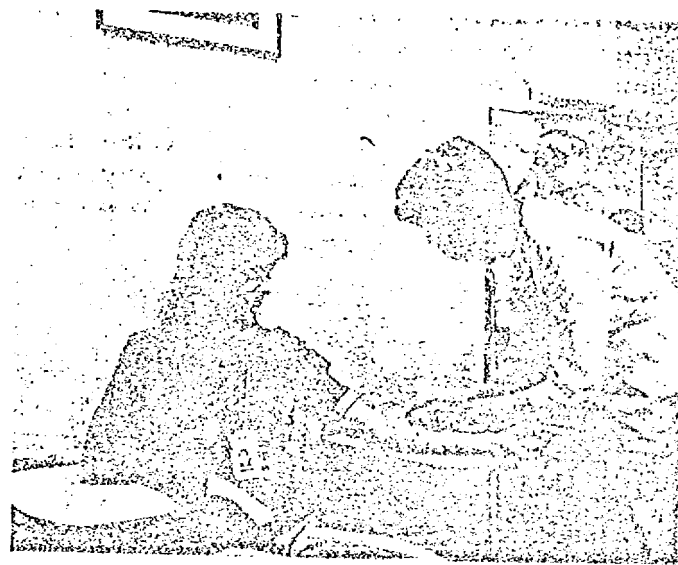
Dallas
Chalk Talk
Dryden File

Denver
America on the Rocks
Alcoholism
LSD: Insight or Insanity? (General Audience)

San Francisco
Alcoholism: The Bottom Line
America on the Rocks
Dryden File
Weber's Choice
Medical Aspects of Alcoholism (For those in the alcoholism field or other trained audiences)
The Other Guy Parts 1 & 2 (General Audiences)

Seattle
America on the Rocks
Chalk Talk
Dryden File

IRS Unit Provides Comprehensive Services



Blood testing is one service offered by the IRS unit.

The Internal Revenue Service Center in Philadelphia has developed and is currently operating one of the more comprehensive agency operated health units in the Philadelphia Region. The facility, which includes nine treatment rooms and three offices, provides health services for 3209 employees. It is operated by three full-time nurses, a laboratory technician, and a part-time physician who is on duty four hours per day, four days per week. Also, whenever the employed population on the night shift is over 300 employees, a night shift nurse is assigned to cover this tour of duty.

Besides the normal range of services provided by health units such as emergency care, referrals, and treatments requested by private physicians, the facility also provides physical examinations to employees 35 years old or older. Other services provided by the facility include glaucoma testing, diabetes screening, hypertension screening, tuberculosis testing, and immunizations. Since the Center has its own laboratory, the results of these screenings are quickly available to the employees. The unit also includes blood donations with the help of a mini computer. The unit staff also conducts a first aid course.

Ms. Elsie Weiss, Chief Nurse of the unit, says that the employees are well aware of the services the unit provides and they frequently utilize these services. During the past year alone, 22,863 employee visits were made to the health unit.

Both the medical and administrative staff are quite proud of their health unit. The health unit is primarily interested in preventive medicine which detects medical abnormalities early in order that the employee can be referred for treatments in time to alleviate extended illnesses. The primary objective of the IRS medical staff is to provide quality service for their employees.

Latest Developments in Alcoholism and Drug Abuse

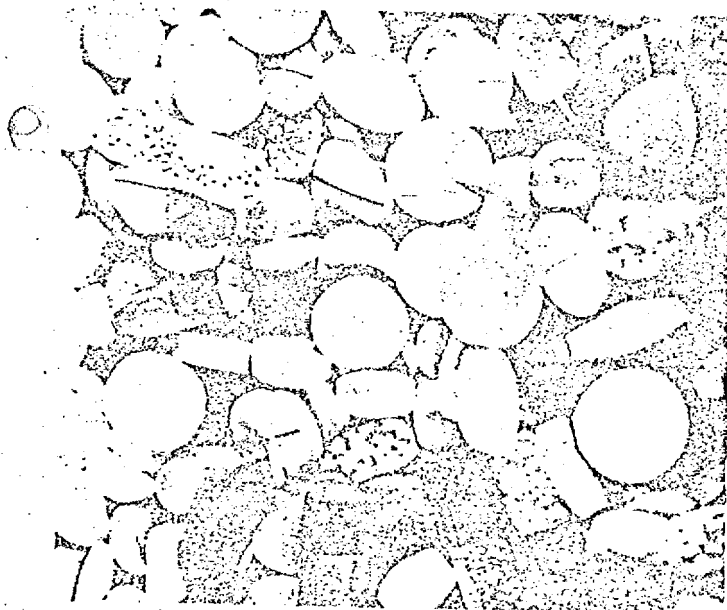


Photo courtesy of the Drug Enforcement Administration.

Recent agency and Commission activities point to an ever increasing interest in the development of more effective agency alcoholism and drug abuse programs.

—Program reviews have been completed at the headquarters of the forty largest Federal agencies. Using the FY 75 installation counseling reports as a basis for discussion, Commission officials reviewed these reports with agency personnel. Letters back to the agencies summarized the meetings and also made

—Air Force is completing five regional workshops for over 300 civilian personnelists and social action personnel in which Commission and Air Force personnel have reviewed AF installation actions required to mount more effective programs.

—In April, Army conducted a one week training conference for 125 civilian program coordinators. A Commission official reported on Army counseling results as they compared to government wide statistics.

—NASA announced its new Employee Assistance program which will be located in installation medical departments. NASA medical personnel were briefed extensively on their new responsibilities at their annual conference held in May.

—More than 20 Federal agencies in the Washington area now host noon time A.A. meetings (see article in this issue).

—Agency representatives, under the aegis of the FEB, have received extensive briefings in New York, Dallas-Fort Worth, Denver and Seattle.

—HUD conducted a full-day session at its Columbia, Maryland training center on its new employee counseling program. In attendance were labor and employee relations specialists from all regions.

I would appreciate being placed on the regular Occupational Health Reporter mailing list.

Name _____


Agency or Business _____

Street _____

City & State _____ Zip _____

Send to:

Cheryl Johnson, Editor
Occupational Health Reporter
U. S. Civil Service Commission
1900 E Street, N.W.
Washington, D.C. 20415

 "OCCUPATIONAL HEALTH REPORTER" is published by the Division of Occupational Health, Bureau of Retirement, Insurance, and Occupational Health, U. S. Civil Service Commission, 1900 E Street, N.W., Washington, D. C. 20415.

DD/A Registry

File

Medical

DD/A Registry

77-4792

MEMORANDUM FOR THE RECORD

SUBJECT : Recommendations Concerning Agency Program
for the Prevention and Treatment of
Alcoholism

REFERENCE: Memo for D/Pers from D/OMS dtd 15 Aug 77,
same subject

On 23 August, in a telephone conversation
between [REDACTED] and the undersigned, the
following points were covered concerning referent
memorandum:

a. [REDACTED] has no objections to our
proceeding with Dr. Bohrer's recommendations.

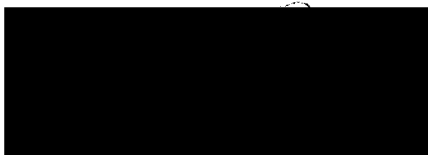
b. He suggested the easiest and quickest way
to obtain the Director's signature on the policy
statement referred to in subparagraph 2a. would be
through him. He intends to send the Director a
memorandum covering the various discussions he has
had on the subject and will recommend that he sign a
policy statement in support of the program and of
the goal of rehabilitation. At the time he
forwards the memorandum, it would be convenient for
him to include such a policy statement unless the
D/Pers prefers to handle it separately through
other channels.

c. He plans to recommend to the Director that
he comment on the alcohol program in a future
"Notes From The Director" and perhaps that might be
an opportune time for him to include a couple of
paragraphs on the use of the in-house Alcoholics
Anonymous group and the new aspects of the program,
as set forth in Dr. Bohrer's memorandum, and
underline the key points in the policy statement

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which the Director will issue. He recommended that the Office of Personnel prepare a suitable "Director's Note."

I told him that we would take appropriate action and be back in touch with him through the Acting Deputy Director for Administration.



Acting Director of Personnel

STATINTL

Attachment

Distribution:

- Orig & 1 - C/SAS/OP
- 1 - D/OMS
- 1 - D/Pers
- 1 - D/Pers Chrono
- 1 - A/DDA

15 August 1977

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queried by [REDACTED] about such public announcement. They are in agreement with such announcement but would like [REDACTED] to be the referral point with their identity remaining anonymous to the general Agency populace. I have no problem with that arrangement and neither does [REDACTED]. Other agencies (see attachment) apparently have publicized the existence of in-house Alcoholics Anonymous groups and meetings.

STATINTL

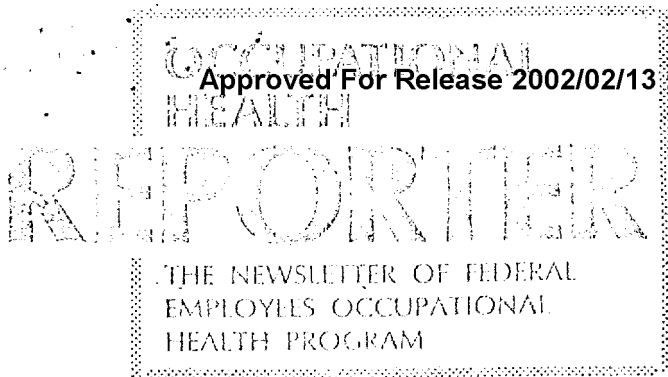
c. An expanded educational effort particularly directed at supervisors under the auspices of the Office of Personnel but supported by OMS using available film, guest lectures, etc.

3. It would seem to me that with the program outlined above and the experience gained from it over a period of at least six and perhaps as long as twelve months, we would be in a much better position to judge the need for additional personnel such as a counselor. I believe the willingness of the in-house Alcoholics Anonymous group to permit public announcement of their availability and the willingness of the Agency to acknowledge their existence and role is a significant positive step to strengthen the program. It may be that at a later date some Alcoholics Anonymous members would be willing to participate in the educational program under certain circumstances.

STATINTL

[REDACTED]
Charles A. Bohrer, M. D.

Att



Volume 8, Number 7

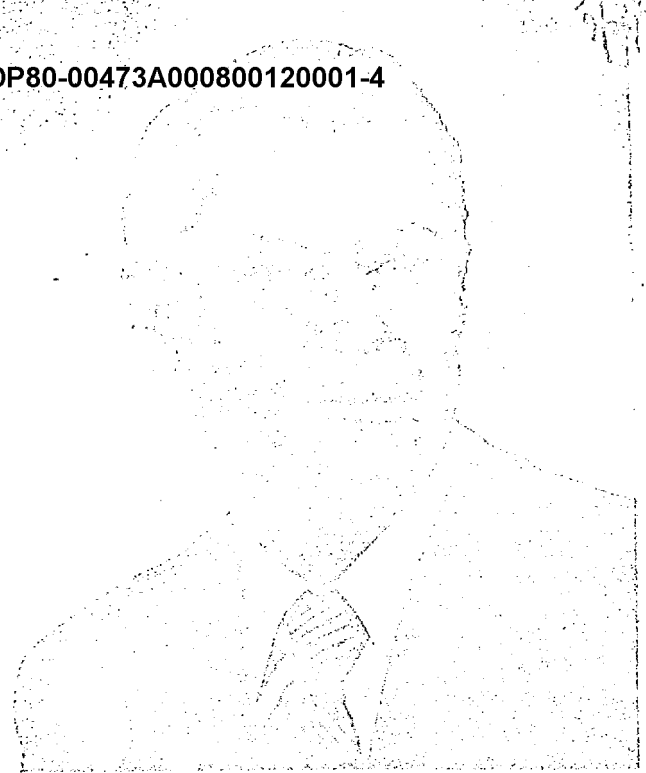
July 1977

CSC Testifies on Alcoholism Program at Senate Hearings

On May 18 and 19, 1977, the Senate Subcommittee on Alcoholism and Drug Abuse conducted hearings on occupational alcoholism programs and proposed legislation S.1107. The proposed legislation would authorize funds for public and private sector employers to encourage the development of occupational alcoholism programs.

Those called to testify included HFW, Postal Service, the CSC, the Alcohol and Drug Problems Association, the National Council on Alcoholism and other representatives from the public and private sectors. Mr. George J. McQuoid, Deputy Executive Director of the U. S. Civil Service Commission reported on the progress of Federal agencies in developing occupational alcoholism programs for their employees. Mr. McQuoid's statement to Senator Hathaway, the Subcommittee Chairman, described the efforts to date as "... a good beginning in dealing with a difficult problem area." He provided the Subcommittee with a review of agency counseling activity during the first four years of program operation (FY 72 through 75). Agency coordinators reported counseling 21,500 employees with alcohol problems. When tabulation of the FY 76 data is completed, the figure is expected to exceed 30,000.

Mr. McQuoid also noted that the actual number of employees impacted may total as much as 60,000 or approximately 3% of the Federal work force. He cited Professor Harrison Rice's research that significant numbers of Federal employees with alcohol problems are being counseled and referred by supervisors, medical



Mr. George J. McQuoid, Deputy Executive Director of the U.S. Civil Service Commission.

personnel or union representatives and hence are not reported to the Commission by agency coordinators. He also noted that an unknown number of employees are seeking help on their own as a result of agency educational efforts. Agencies are also counseling employees with alcoholic family members. In summarizing the foregoing points, Mr. McQuoid stated that the Commission "considers this an indication of increasing agency interest and concern".

The prepared statement noted that much still remains to be done. The FY 75 installation counseling reports showed that about 62% of the locations representing less than 25% of the Federal employees (small installations for the most part) reported no counseling during that one year period. Mr. McQuoid did cite the establishment of two consortia type programs in Boston, MA, and Austin, TX, as an encouraging approach for the development of programs for small installations located in the same geographic area. The Office of Management and Budget has endorsed this effort.

Mr. McQuoid also identified the following areas which require increased CSC and agency efforts:

Continued page 2, top left column

receptivity of the installation heads and supervisors. The Trice research and GAO testimony at House hearings in June 1976, reported that many installation heads and supervisors remain unconvinced about the need for the programs.

--the importance of union involvement. When union interest and involvement increases there is a corresponding increase in supervisory usage of the program.

--the role of the coordinators. Research indicates that many coordinators are untrained and have insufficient time to accomplish the necessary tasks.

The CSC and all of the other witnesses at the hearings described occupational alcoholism programs as necessary and highly useful in identifying alcoholic people at earlier stages.

A "Double - Martini" Lunch

"For me, that meeting was like a double martini lunch!" The speaker was an exuberant Alcoholics Anonymous member after a recent nighttime gathering in a Washington, D.C. Federal building. Neither the comment nor the locale was unusual, as AA groups in increasing numbers take root and flourish in the unfamiliar but friendly soil of government agencies. The remark, of course, was meant to emphasize the psychological support provided to recovering alcoholic workers by work-place A.A. meetings. The simile falls short, however, for the "boost" is provided without the "let down".

Until recently, such meetings were rare and usually unpublicized. The stigma attached to alcoholism, coupled with a fear of damaged careers, discouraged all but the most adamant. It was accepted wisdom that alcoholic workers could not attend A.A. meetings at their place of employment. The "Hughes Act" (PL 91-616) and subsequent Civil Service Commission actions (accepting alcoholism as a disease, prohibiting discrimination in employment, and requiring that

agencies develop and maintain "prevention, treatment and rehabilitation programs and services" for their alcoholic employees) have had a perceptible impact in altering these attitudes. One of the results has been a proliferation of visible and highly successful A.A. groups in a wide range of Federal agencies.

According to Don Phillips, Alcoholism/Drug Abuse Program Manager, U.S. Civil Service Commission, A.A. groups, conducting more than 20 meetings a week, are now established in at least 12 departments and agencies in the metropolitan area. Groups are planned in several others. In addition, the Government Printing Office, as a part of its alcoholism program, conducts daily group meetings which, while not technically A.A., are frequently conducted by A.A. members, using an A.A. format. "I've been personally pleased," said Mr. Phillips, "with the way management in the Federal agencies has cooperated with A.A. and endorsed the idea."

While admissions policies differ from agency to agency, almost all meetings are open to anyone holding a Federal identification pass and willing to state his or her destination. Most are open to the public at large (although "Closed" meetings are restricted to persons with an alcohol problem). The Civil Service Commission does not have a complete list of all A.A. meetings in Federal agencies, and would appreciate hearing about those it is unaware of (Call Art Purvis on 632-7672). Those it is aware of are at the following agencies: Agriculture, Army, Commerce, Civil Service Commission, Health, Education and Welfare, Interstate Commerce Commission, Interior, Labor, Library of Congress, Navy, State Department and Treasury. Further information about these meetings and how to start new ones can be obtained from the Civil Service Commission at the above number, or by writing to:

Mr. Donald Phillips
Alcoholism/Drug Abuse Program Manager
USCSC, Room 3468
1900 E. St. NW
Washington, D.C. 20415

Available Films

The use of films on alcoholism and drug abuse can be a useful supplement to supervisory training courses and special educational programs for employees. The CSC central office and regional offices are offering as a service their films to agency health or training personnel. The films are available for that region *only*.

Central Office (Washington Metropolitan area only)
Father Martin's Chalk Talk (General Audience)
The Dryden File (White Collar - Supervisory Training)
Weber's Choice (Blue Collar - Supervisory Training)
Alcoholism: The Bottom Line (Supervisory Training)
Living Sober: The Class of '76 (General Audience)
Walter Fish (General Audience)
America on the Rocks (General Audience)
Alcohol, Drugs, and Alternatives (General Audience)
US (General Audience)
Need for Decision (Supervisory Training)

Boston
Chalk Talk

New York
America on the Rocks
Chalk Talk
Dryden File
Remember My Name (General Audience)

Philadelphia
Alcoholism: The Bottom Line
America on the Rocks
Chalk Talk
Dryden File

Atlanta
None Available

Chicago
Chalk Talk
Dryden File

St. Louis
None Available

Dallas
Chalk Talk
Dryden File

Denver
America on the Rocks
Alcoholism
ISD: Insight or Insanity? (General Audience)

San Francisco
Alcoholism: The Bottom Line
America on the Rocks
Dryden File
Weber's Choice
Medical Aspects of Alcoholism (For those in the alcoholism field or other trained audiences)
The Other Guy Parts 1 & 2 (General Audiences)

Seattle
America on the Rocks
Chalk Talk
Dryden File

IRS Unit Provides

Comprehensive Services



Blood testing is one service offered by the IRS unit.

The Internal Revenue Service Center in Philadelphia has developed and is currently operating one of the more comprehensive agency operated health units in the Philadelphia Region. The facility, which includes nine treatment rooms and three offices, provides health services for 3209 employees. It is operated by three full-time nurses, a laboratory technician, and a part-time physician who is on duty four hours per day, four days per week. Also, whenever the employed population on the night shift is over 300 employees, a night shift nurse is assigned to cover this tour of duty.

Besides the normal range of services provided by health units such as emergency care, referral, and treatments requested by private physicians, the facility also provides physical examinations to employees 35 years old or older. Other services provided by the facility include glaucoma testing, diabetes screening, hypertension screening, tuberculosis testing, and immunizations. Since the Center has its own laboratory, the results of these screenings are quickly available to the employee. The unit also schedules blood donations with the help of a mini computer. The unit staff also conducts a first aid course.

Continued page 4, top left column

Ms. Elsie Weiss, Chief Nurse of the unit, says that the employees are well aware of the services the unit provides and they frequently utilize these services. During the past year alone, 22,863 employee visits were made to the health unit.

Both the medical and administrative staff are quite proud of their health unit. The health unit is primarily interested in preventive medicine which detects medical abnormalities early in order that the employee can be referred for treatments in time to alleviate extended illnesses. The primary objective of the IRS medical staff is to provide quality service for their employees.

Latest Developments in Alcoholism and Drug Abuse

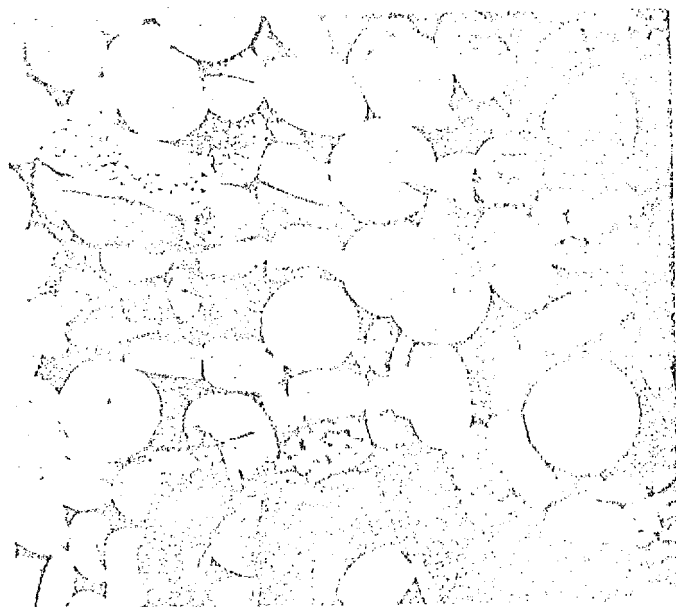


Photo courtesy of the Drug Enforcement Administration.

Recent agency and Commission activities point to an ever increasing interest in the development of more effective agency alcoholism and drug abuse programs.

—Program reviews have been completed at the headquarters of the forty largest Federal agencies. Using the FY 75 installation counseling reports as a basis for discussion, Commission officials reviewed program results and problem areas with agency personnel. Letters back to the agencies summarized the meetings and also made recommendations for program improvements.

—Air Force is completing five regional workshops for over 300 civilian personnelists and social action personnel in which Commission and Air Force personnel have reviewed AF installation actions required to mount more effective programs.

—In April, Army conducted a one week training conference for 125 civilian program coordinators. A Commission official reported on Army counseling results as they compared to government wide statistics.

—NASA announced its new Employee Assistance program which will be located in installation medical departments. NASA medical personnel were briefed extensively on their new responsibilities at their annual conference held in May.

—More than 20 Federal agencies in the Washington area now host noon time A.A. meetings (see article in this issue).

—Agency representatives, under the aegis of the FEB, have received extensive briefings in New York, Dallas-Fort Worth, Denver and Seattle.

—HUD conducted a full-day session at its Columbia, Maryland training center on its new employee counseling program. In attendance were labor and employee relations specialists from all regions.

I would appreciate being placed on the regular Occupational Health Reporter mailing list.

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Washington, D.C. 20415

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